

COURSE UNIT (MODULE) DESCRIPTION

Course unit (module) title	Code
Internship	

Lecturer(s)	Department(s)
Coordinator: Assoc. Prof. Dr A. Klimašauskas	Vilnius University, Faculty of Medicine, Institute of Clinical
	Medicine
Other(s): Prof. T. Poškus; Prof. D. Ramašauskaitė;	
Prof. Čerkauskienė; Prof. Šapoka; Jr. Asst. P. Uksas	

Study cycle	Type of the course unit (module)
Integrated studies (first and second cycle)	Compulsory

Mode of delivery	Period when the course unit (module) is delivered	Language(s) of instruction
Gaining practical skills in internal diseases, surgery and traumatology, obstetrics and gynaecology, children's diseases, and working in emergency units and ambulances.	Semesters 11 and 12	Lithuanian, English

Requirements for students							
Prerequisites: Have completed the previous course subjects	Additional requirements (if any):						

Course (module) volume in credits	Total student's workload	Contact hours	Self-study hours
53	1431	1375	56

Purpose of the course unit (module): programme competencies to be developed

To improve the practical knowledge and skills acquired while studying in the medical study programme.

To gain additional skills and abilities required for independent work according to the Lithuanian Medical Standard 'Medical Doctor'.

To get prepared for the Medical Doctor's professional life and residency training.

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Learning outcomes of the course unit (module)	Teaching and learning	Assessment methods
	methods	
General Competencies		
Upon successful completion of this module,		
students will be able to:		
Act with integrity; think critically and self-	Developing knowledge, clinical	Each cycle ends with an
critically; be empathetic, creative, initiative, and	skills and attitudes by working	evaluation of the cycle in the
follow ethical commitments.	with the Internship supervisor or	presence of interns.
	their dedicated doctor or	
	paramedic in pre-designated	
	healthcare institutions and	
	ambulances. Each cycle starts	
	with an introduction: a	
Act independently, organise and plan one's	discussion of expectations, goals	
activities, assess the limits of one's competencies,	and objectives with the cycle	
and ask for help when needed; solve problems	supervisors.	
and take decisions, especially in unfamiliar	Work using simulators.	
situations; communicate and cooperate within a	Presentation of clinical cases.	

toom		
team.		
Show respect, open-mindedness and interest in other cultures and subcultures; analyse and critically evaluate different cultural contexts; work in an international and multicultural environment; and develop a general knowledge of non-medical sciences.		
Share, and encourage others to share all the information they need to work effectively as a team.		
Proactively care for one's emotional, mental and		
physical health and well-being. Identify complex work and social problems; strive for the most appropriate solutions to problems.		
Demonstrate open-mindedness towards various ideas and perspectives; be able to see new opportunities in change; and strive to acquire the competencies needed for future transitions.		
Continue with further studies, informal learning and lifelong learning, apply the gained knowledge and skills in practice, and teach others.		
Specific Competencies Upon successful completion of this module, students will be able to:		
Use the information and IT effectively, and maintain proper documentation and electronic databases.	Learning while working with the Internship supervisor or their dedicated doctor or paramedic in pre-designated healthcare institutions and ambulances.	Each cycle ends with an evaluation of the cycle in the presence of interns.
	Each cycle starts with a discussion with the cycle supervisors and interns.	
Communicate and collaborate professionally and effectively with patients or the parents/guardians of a patient (infant or child): • to clarify and describe the reason for the patient's admission; explain to the patient or their parents/guardians the understanding of the reason for the patient's admission; • to understand the patient's perspective and listen to the patient's or their parents'/guardians' concerns about their ailments; • to explain the diagnosis and further tests and treatment, and discuss and plan such treatment and tests with the patient or their parents/guardians; • to encourage the patient or their parents/guardians to cooperate during the consultation and become involved in the treatment; • at the end of the consultation to ensure that	Learning while working with the Internship supervisor or their dedicated doctor or paramedic in pre-designated hospitals, clinics and ambulances. The supervisors and institutions are selected from a list drawn by the coordinators. The priority for selecting the supervisor and the institution is the average grade. Each cycle starts with a discussion with the cycle supervisors and interns. Each cycle ends with an evaluation of the cycle in the presence of interns.	Each cycle ends with an evaluation of the cycle in the presence of interns.

the patient, their representative, and parents/guardians have understood all the information provided.		
Accurately collect the necessary information about the patient and their illness, and perform a general examination of the patient: • to collect medical, lifestyle, social and family case history; • to perform a physical examination of the patient; • to perform a basic neurological assessment of the patient (assessing the patient's state of consciousness, pupils, speech, motor skills and senses); • to assess primary psychiatric condition; • to draft a provisional diagnosis; • to assess the patient's condition and provide first aid for respiratory, circulatory and consciousness issues; • to assume, based on clinical evidence, whether the person is under the influence of alcohol or psychoactive substances; • to monitor and assess the indicators and dynamics of vital functions; • to recognise and document the signs of death.	Learning while working with the Internship supervisor or their dedicated doctor or paramedic in pre-designated hospitals, clinics and ambulances. The supervisors and institutions are selected from a list drawn by the coordinators. The priority for selecting the supervisor and the institution is the average grade. Each cycle starts with a discussion with the cycle supervisors and interns. Each cycle ends with an evaluation of the cycle in the presence of interns.	Each cycle ends with an evaluation of the cycle in the presence of interns.
Administer the tests needed to diagnose diseases, conditions and disorders within the scope of the doctor's competence, and assess and interpret the results of: • general urine test; • general blood test; • biochemical blood and urine tests; • coagulation tests; • ABO and Rh (D) blood group tests; • infectious marker tests; • faecal tests (faecal occult blood test, coprogram); • ECG; • pulse oximetry; • radiological examination based on the location of the suspected pathological condition; • ultrasound examination based on the location of the suspected pathological condition; • endoscopic examination of the alimentary tract—oesophagogastroduodenoscopy and colonoscopy.	Learning while working with the Internship supervisor or their dedicated doctor or paramedic in pre-designated healthcare institutions and ambulances. The supervisors and institutions are selected from a list drawn by the coordinators. The priority for selecting the supervisor and the institution is the average grade. Each cycle starts with a discussion with the cycle supervisors and interns. Each cycle ends with an evaluation of the cycle in the presence of interns.	Each cycle ends with an evaluation of the cycle in the presence of interns.
Perform procedures needed to diagnose and creat diseases, conditions and disorders within the scope of the doctor's competence: • to record the 12-lead and 3-lead ECG and	Learning while working with the Internship supervisor or their dedicated doctor or paramedic in pre-designated healthcare	Each cycle ends with an evaluation of the cycle in the presence of interns.

interpret the ECG results;

- to measure capillary blood glucose levels;
- to perform peripheral venous puncture and catheterisation;
- to take venous blood or a blood culture for testing;
- to perform subcutaneous and intramuscular injections;
- to perform intravenous therapy and use infusion equipment;
- to determine the blood group and perform intravenous blood transfusion;
- to administer medicines (intramuscular, intravenous, intranasal, oral, subcutaneous, rectal, adhesive, using vaporiser, autopump or auto-injector);
- to relieve pain using non-pharmacological and pharmacological means;
- to take samples of blood, wounds, white matter, ears, eyes, upper respiratory tract, genital tract, urine, and faeces for microbiological examination in standard media;
- to perform pulse oximetry;
- to cleanse the alimentary tract;
- to insert a nasogastric tube;
- to perform an eye wash;
- to remove non-stuck superficial inclusion bodies from the eyes, ears and nose;
- to remove a tick with the head embedded;
- to perform bladder catheterisation;
- to assess diuresis;
- to apply bandages on various body parts;
- to prepare an uncomplicated wound for surgical repair and repair the wound using primary surgery methods;
- to perform an incision of the skin or a subcutaneous abscess;
- to use physical restraint on patients with mental and behavioural disorders and monitor the use of physical restraint under the statutory procedures;
- to use a neck splint;
- to immobilise spinal or pelvic fractures;
- to immobilise the fractured and/or dislocated limb with a splint;
- to assess temporary incapacity for work according to the assessment rules of temporary incapacity for work and issue a certificate of incapacity for work and/or a certificate of absence from work.

institutions and ambulances. The supervisors and institutions are selected from a list drawn by the coordinators. The priority for selecting the supervisor and the institution is the average grade. Each cycle starts with a discussion with the cycle supervisors and interns. Each cycle ends with an evaluation of the cycle in the presence of interns.

Suspect, recognise and provide first aid to patients of all ages in cases of diseases, injuries and accidents, exposure to hazardous environmental factors and natural childbirth, initiate treatment of these conditions and diseases, and, if necessary, involve other personal health care professionals and/or transport and/or forward the patient for further consultation in the cases of:

- coma;
- shock;
- heavy traumatic and non-traumatic bleeding;
- hyperthermia and hypothermia;
- dehydration;
- convulsive syndrome;
- choking or inclusion bodies (present or suspected) in tissues or natural body orifices and cavities;
- acute allergic reactions and anaphylactic shock;
- an injury;
- an injury when congenital or acquired coagulation disorders are present;
- a head injury and short-term loss of consciousness;
- complex regional pain syndrome;
- acute burns and frostbite;
- paralysis;
- speech impairment;
- severe headaches;
- cardiac arrest;
- acute cardiovascular diseases;
- syncope;
- cyanosis;
- limb oedema;
- acute abdominal pain;
- jaundice;
- nausea and vomiting;
- vomiting blood;
- melena and fresh blood in faeces;
- diarrhoea;
- constipation;
- ascites;
- hyperglycaemia and diabetic ketoacidosis;
- hypoglycaemia;
- swollen joints;
- itching;
- skin and mucous membrane rashes;
- visual impairment;
- hearing impairment;
- dysphagia;
- hiccups;
- acute renal and urological diseases;
- dysuria;
- haematuria;

Learning while working with the Internship supervisor or their dedicated doctor or paramedic in pre-designated healthcare institutions and ambulances. The supervisors and institutions are selected from a list drawn by the coordinators. The priority for selecting the supervisor and the institution is the average grade. Each cycle starts with a discussion with the cycle supervisors and interns. Each cycle ends with an evaluation of the cycle in the presence of interns.

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urinary retention; gynaecological acute obstetric and conditions; childbirth: a restless baby; a crying child/infant; eating disorders; acute mental and behavioural disorders; suicidal or violent behaviour; poisoning (or suspected poisoning) with dangerous or highly hazardous substances, gases, an overdose of psychoactive substances or medicines, where antidotes are indicated: bite by a venom-secreting animal; bites, scratches and lacerations by rabid or potentially rabid animals; tick infestation; suspicion of a perilous infection, where a patient needs to be isolated; complications caused by catheters, tubes and other devices; disruption of an artificial stoma (when it needs to be replaced or opened). Be able to apply scientific (evidence-based Learning while working with Each cycle ends with an medicine) principles, methods and knowledge in the Internship supervisor or their evaluation of the cycle in the medical practice dedicated doctor or paramedic presence of interns. in pre-designated healthcare institutions and ambulances. The supervisors and institutions are selected from a list drawn by the coordinators. The priority for selecting the supervisor and the institution is the average grade. Each cycle starts with a discussion with the cycle supervisors and interns. Each cycle ends with an evaluation of the cycle in the presence of interns. Promote healthy lifestyles, address public health Learning while working with Each cycle ends with an issues, and work effectively in the health care the Internship supervisor or their evaluation of the cycle in the system by applying knowledge of disease dedicated doctor or paramedic presence of interns. prevention in pre-designated healthcare institutions and ambulances. The supervisors and institutions are selected from a list drawn by the coordinators. The priority for selecting the supervisor and the institution is the average grade. Each cycle starts with a discussion with the cycle supervisors and interns. Each cycle ends with an evaluation of the cycle in the presence of interns.

				C	ontac	t hours			Self	study work: time and assignments
Topics		Lectures	Futorials	Seminars	Exercises	Laboratory work	Internship	Total contact hours	Self-study hours	Assignments
Course:									<u> </u>	
Introduction to the				7				7		
Exercises in simula	ttion rooms				10			10	14	In simulation rooms, independently perform procedures needed to diagnose and treat diseases, conditions and disorders within the scope of the doctor's competence
Obstetrics and gyna	aecology			2			192	194	6	Prepare for the seminar and practical sessions in obstetrics and gynaecology using the material received during the Introduction to the Internship
Surgery and trauma	atology			2			192	194	6	Prepare for the seminar and practical sessions in surgery and traumatology using the material received during the Introduction to the Internship
Children's diseases				2			192	194	6	Prepare for the seminar and practical sessions on children's diseases, using the material received during the Introduction to the Internship
Internal diseases				2			192	194	6	Prepare for the seminar and practical sessions in internal diseases, using the material received during the Introduction to the Internship
Accident and emergency medicine	Accident and emergency medicine in a hospital			2			192	194	6	Prepare for the seminar and practical sessions in emergency medical assistance using the material received during the Introduction to the Internship
	Accident and emergency medicine in an ambulance			2			192	194	6	Prepare for the seminar and practical sessions in emergency medical treatment in ambulances, using the

							material received during the Introduction to Internship
Optional cycle		2		192	194	6	Prepare for the seminar and practical sessions in the optional cycle, using the material received during the Introduction to Internship
Total		21	10	1344	1375	56	

Assessment strategy	Weigh t, %	Deadline	Assessment criteria
Course: Internship			
Examination in a computer room	50 %	Within a week after the end of the Internship in May	The examination is held in the computer room of the Information Technology Services Centre. A student is given a series of clinical cases in obstetrics and gynaecology, surgery and traumatology, children's diseases, and internal diseases during the examination. Each clinical case consists of six sections. A student: in Section 1, refines a medical history; in Section 2, describes the clinical examination of the patient; in Section 3, administers the laboratory tests needed to make a diagnosis; in Section 4, asks for instrumental test results; in Section 5, makes a clinical diagnosis; in Section 6, prescribes treatment. The assessment is as follows: 10 (excellent): excellent, exceptional knowledge and skills; 9 (very good): robust and good knowledge and skills; 8 (good): above-average knowledge and skills, with some minor errors; 6 (satisfactory): knowledge and skills are below average, with errors; 5 (weak): knowledge and skills meet the minimum requirements; 4 (unsatisfactory): minimum requirements are not met.
Examination in simulation rooms	50 %	Within a week after the end of the Internship in May	The examination is held in simulation rooms. During the examination, a student solves clinical assignments and performs practical exercises in the clinical cases of obstetrics and gynaecology, surgery and traumatology, children's diseases, internal diseases, and emergency medicine. The assessment is as follows: 10 (excellent): excellent practical skills; 9 (very good): good practical skills; 8 (good): above-average practical skills; 7 (average): average skills, with some minor errors; 6 (satisfactory): skills are below average, with errors; 5 (weak): skills meet the minimum requirements; 4 (unsatisfactory): minimum requirements for the skills are not met.
Final assessment	100		The mean average of the examinations held in computer and simulation rooms

Author	Year of public ation	Title	Issue of a periodical or volume of a publication	Publishing place and house or weblink		
Required reading						
Zane RD	2019	Pocket Emergency Medicine	4th Edition	https://www.medicosrepublic.com /pocket-emergency-medicine-4th- edition-pdf-free-download/		
Cameron P, Little M, Biswadev M, Conor D	2019	"Textbook of Pediatric Emergency Medicine"	5th Edition	Elsevier		
Vaitkaitis D, Pranckūnas A.	2017	Pirmoji medicinos pagalba		Kaunas		
	2020	Law of the Republic of Lithuania on the Registration of Death of a Human Being, and on Critical Conditions		https://e-seimas.lrs.lt/portal/legalAct/lt/TAD/TAIS.37504/BPfIAGLGpJ(translation into English: https://e-seimas.lrs.lt/portal/legalAct/lt/TAD/TAIS.326187?jfwid=18606guvr9)		
	2022	LITHUANIAN MEDICAL STANDARD MN 7:2022. MEDICAL DOCTOR		Order No V-930 approving the Lithuanian Medical Standard MN 7:2022 'Medical doctor' (e-tar.lt)		
	2021	The European Resuscitation Council Guidelines for Resuscitation		https://cprguidelines.eu/		
	2021	Surviving Sepsis Campaign Guidelines 2021		https://www.sccm.org/Clinical- Resources/Guidelines/Guidelines/ Surviving-Sepsis-Guidelines- 2021		
Ed. Šapoka V.	2020	Internistas. Praktinis vadovas	1-598	Vilnius		
Ed. Scharschmidt BF	2007	Internal Medicine	1st edition	Cambridge Pocket Clinicians. https://booktree.ng/cambridge- pocket-clinicians-internal- medicine-1st-edition/		
Ed. Budrys V.	2011	Urgentinė neurologija.		VU Library: Vilnius: UAB Vaistų žinios		
Ed. Steven L, Busl KM	Octobe r 2021	Continuum - Lifelong Learning in Neurology. Neurocritical Care.	Vol.27, No.5.	https://journals.lww.com/continuum/toc/2021/10000		
LaHue S, Levin M.	2021	Emergency Neurology (2 ed.).	2nd edition			
Žaliūnas R. at al.	2020	Kardiologijos pagrindai studentams		http://ebooks.vitaelitera.lt/eb/2303 /kardiologijos-pagrindai- studentams/		
Griffin BP	2018	Manual of Cardiovascular Medicine		https://ebookcentral.proquest.com /lib/viluniv- ebooks/detail.action?docID=6023 334		
Brugha R, Marlais M, Abrahamson E.	2015	Vaikų klinikinio ištyrimo vadovas.		VU Library: Vilnius: UAB Vaistų žinios		
Kliegman RM.	2020	Nelson Textbook of Pediatrics, 21st Edition		https://www.clinicalkey.com/#!/br owse/book/3-s2.0- C20161017121?indexOverride=G LOBAL		
Lissauer T, Carroll W.	2022	Illustrated Textbook of Paediatrics,	6th edition	https://www.clinicalkey.com/#!/br owse/book/3-s2.0-C20190011636		
Ed. Pundzius J.	2012	Chirurgija. Bendroji dalis	Volume I	Vitae litera		

Ed. Pundzius J.	2012	Chirurgija. Specialioji dalis	Volume II	Vitae litera
Williams NS,	2018	Bailey & Love's Short	27th	CRC Press
O'Connell PR, McCaskie A		Practice of Surgery	edition	
Kocius, M, Porvaneckas, N et al.	2016	Ortopedija traumatologija		Vilnius University Press.(https://virtualibiblioteka.vu _lt/primo- explore/fulldisplay?docid=VUB0 1000827245&context=L&vid=V U⟨=lt_LT&search_scope=V U IG ALL&adaptor=Local%20S earch%20Engine&tab=default_ta b&query=any,contains,Ortopedija %20traumatologija)
Solomon L, Warwick DJ, Nayagam S.	2014	Apley and Solomon's concise system of orthopaedics and trauma		Crc Press. (https://virtualibiblioteka.vu.lt/primo-explore/fulldisplay?vid=VU&docid=VUB01000718918)
	2019	Akušerijos ir neonatologijos diagnostikos ir gydymo metodikos		sam.lrv.lt/lt/veiklos- sritys/programos-ir- projektai/sveicarijos-paramos- programa/akuserijos-ir- neonatologijos-diagnostikos-ir- gydymo-metodikos/akuserijos- diagnostikos-ir-gydymo- metodikos
Magowan BA	2019	Clinical Obstetrics and Gynaecology	4th edition	https://www.clinicalkey.com/#!/br owse/book/3-s2.0- C2016003512X
Smith RP	2017	Netter's Obstetrics and Gynecology	3rd edition	https://www.clinicalkey.com/#!/br owse/book/3-s2.0-C20150058695